

# Appointment Application Questionnaire: For a Paid Position



[Form AAQ:PP - V1 - Dec 2015]

At Incredible Kids (IK) we highly value the people that give their time and effort towards the achievement of the charity goals. The function of all volunteer and paid staff members are to enhance the quality of provision of services. The trustees have a duty of care towards all volunteers and paid workers and therefore will use their best judgement in the appointment process and monitoring of the performance of assigned roles. The objective is to create a satisfying experience and safe environment for all members.

In order to ensure that the charity provides the best possible service to our constituents, we require that all applicants (volunteer or paid staff) complete the relevant questionnaire as a standard step in a fair appointments process. The provided information enables us to make informed decisions around human resources and the services we set out to deliver.

To carry out its work, IK seeks to appoint effective and appropriate Leaders, and to involve other volunteers in supporting roles, all of whom are required to accept fully the responsibilities of their commitment. The overriding considerations in making all appointments at IK is the safety and security of young people, and their continued development in accordance with IK's purpose and the values as described in Chapter 1 of the POG.

#### Instructions:

- All applicants need to complete an Appointments Application Questionnaire: For a Paid Position.
- Completed and signed questionnaires are considered confidential information and must be returned in the provided sealed envelope, either directly to any member of the charity trustees or the Appointments Secretary.
- Applicants can arrange to meet with any trustee member for the purpose of helping them complete the questionnaire. The aim is to provide information to the applicant, enabling them to make the choices that best reflect their individual needs, abilities and aspirations as an IK staff member.

### Section 1 - Personal Details

Full Name & Surname	
Home/Work Phone Number (s)	
Mobile Phone Number	
Address	
Postcode	
Email address	
Date of Birth	
Emergency Contact Name	
Emergency Contact Number	

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ONLY

## Section 2 – Job Advertised

Which Job are you applying for?

Job Title: .....

Type contract: Fixed term 0hrs / Temporary Fixed hours

How soon can you start / how much notice do you need to give to a current employer?

What days /hours are you available to work?

### Term Time

Tuesday 3.30pm-7.00pm	
Friday 3.30pm-7.00pm	
Saturday (2xmonth)9am-12.30pm	
Saturday 12.00pm-6.00pm	
Specific times (other than above)	

### School holidays

Tuesday	
Friday	
Saturday	
Specific times (other than above)	

## Section 3 – Experience

Please provide us with some information under the following 4 headings.

**Experience:** to include work, volunteering or personal experience with children/young adults with additional needs and their families, or/and experience with children and families in general.

**Reason for wanting this Job:** to include future career path, personal interests.

**Education:** to include relevant qualifications and day training courses in child care, disabilities, family work.

**Skills:** to include any skills you have which may be relevant to the role which you have not mentioned above.

## Section 4 - References

Please supply details of two people who know you well. They should not be family members and one reference should know you for at least 5 years. If you are not sure about who to put forward, we are happy to discuss this with you.

	Referee 1	Referee 2
Name		
Address		
Email address		
Phone Number		
How do you know them?		

## Section 5 - More about you

**Do you have a valid DBS check?**

<b>Yes / No</b>	If Yes, when was your last DBS check completed?    dd / mm / yyyy Did you sign up to the update service?
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(Note: If we decide it is needed IK will arrange for a DBS check at our expense. Also note that not all roles require a DBS check )

**Do you have any particular needs that we should be aware of so as to best support your working with us?**

**Signed:**

**Date:**

Declaration: By signing this form, you confirm that the information supplied is correct and agree to IK keeping the supplied personal information on record and that IK may contact your references directly.

**ADMIN USE ONLY**

Please return this form in a sealed envelope to any Charity Trustee or their appointed collection person. Alternatively, mail to **Kirstie Weaver /Incredible Kids Trustee, 15 Rudgeway Park, Rudgeway, BS35 3RU;** or Email to **incrediblekidsuk@gmail.com**